



# Certificate of Express Mailing Under 37 CFR 1.10

**MS AF**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

*Dilma D. Farnes*  
Signature

Deena D. Farris

Typed or printed name of person signing Certificate

Registration Number, if applicable

**(979) 238-4563**  
**Telephone Number**

**Note:** Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
 Notice of Appeal (1 page)  
 Certificate of Express Mailing Under 37 CFR 1.10 (1 page)  
 Return Receipt Postcard  
 Charge \$1,520.00 to deposit account 04-1512